

Application for Primarily Charitable Organization Property Tax Exemption / 501(c)(2) Property Tax Exemptions

Property Tax Form 50-299

Appraisal District's Name		Phone (area code and number)
Address, City, State, ZIP Code		
This document must be filed with the appraisal district office office of the Texas Comptroller of Public Accounts. Location a at www.window.state.tx.us/propertytax/references/directory/c	nd address information for the appraisal	
GENERAL INSTRUCTIONS: This application is for use in claimin Tax Code Section 11.184. The application applies to property own a determination letter from the Comptroller's office stating that it is 11.184, or 2) a 501(c)(2) corporation that holds title for a qualified	ed on Jan. 1 of this year. In order to claim the either: 1) engaged primarily in charitable fu	s exemption, an organization must receive nctions as defined under Tax Code Section
WHERE TO FILE: This document, and all supporting documentation Location and address information for the appraisal district office in		
APPLICATION DEADLINES: You must file the completed application year for which you are requesting an exemption.	tion with all required documentation beginning	ng Jan. 1 and no later than April 30 of the
DUTY TO NOTIFY: If the chief appraiser grants the exemption, yo when your right to this exemption ends.	ou do not need to reapply annually. You must	notify the chief appraiser in writing if and
ADDITIONAL APPLICATION REQUIRED: To continue to receive and reapply for the exemption.	an exemption after the fifth year, the organiz	ation must obtain a new determination letter
OTHE	R IMPORTANT INFORMATION	
Pursuant to Tax Code Section 11.45, after considering this applica from you. You must provide the additional information within 30 da may extend the deadline for furnishing the additional information by	lys of the request or the application is denied	d. For good cause shown, the chief appraiser
State the Year for Which You are Applying		
Tax Year		
STEP 1: Organization Information		
Name of Organization		
· ·		
Mailing Address		
City, State, ZIP Code		Phone (area code and number)
Organization is a (check one):		
Partnership Corporation Other (specify):		
STEP 2: Applicant Information		
Name of Person Proparing this Application	Titlo	Driver's License Percent LD Cortificate
Name of Person Preparing this Application	Title	Driver's License, Personal I.D. Certificate, or Social Security Number*
If this application is for property owned by a charitable organization that number may be provided in lieu of a driver's license number, number, or social security number:	personal identification certificate	

* Pursuant to Tax Code Section 11.48(a), a driver's license, personal I.D. certificate, or social security number provided in an application for an exemption filed with a chief appraiser is confidential and not open to public inspection. The information may not be disclosed to anyone other than an employee of the appraisal office who appraises property, except as authorized by Tax Code Section 11.48(b).



sign here

Authorized Signature

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STEP 3: Property Information

- Attach one Schedule A form for **each** parcel of real property to be exempt.
- Attach one Schedule B form listing all personal property to be exempt.

STEP 4	: Comptroller's Determination		
Attach a c	opy of the charitable organization's Comptroller property tax determination letter.		
	ou received a Comptroller property tax determination letter that states whether the organization rming charitable functions as defined in Tax Code Section 11.184.		Yes N
In w	hat tax year did you apply for the Comptroller's determination?		
•	ou received a Comptroller property tax determination letter that states whether the organization ation that holds title to property for a qualified charitable organization as defined under Tax Co	` , ` ,	Yes N
In w	hat tax year did you apply for the Comptroller's determination?		
STEP 5	: Certification and Signature		
primarily o	this application, you designate the property described in the attached Schedules A and B as charitable organizations may be claimed in this appraisal district. You certify that the information f your knowledge and belief.	, ,	
print here ▶			
iieie '	Print Name	Title	

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Penal Code Section 37.10.

Date



Schedule A: Description of Real Property

Name of Property Owner

Complete one Schedule A form for **each** parcel of real property to be exempt. List only property owned by the organization. Attach all completed schedules to the application for exemption.

Address, City, State, ZIP Code			
Legal Description (if known)			ct Account Number (if known)
Describe the Primary Use of This Property			
Is the property currently under active construction or physical present of the property currently under active construction or physical present of the property currently under active construction or physical present of the property currently under active construction or physical present of the property currently under active construction or physical present of the property currently under active construction or physical present of the property currently under active construction or physical present of the property currently under active construction or physical present of the property currently under active construction or physical present of the property currently under active construction or physical present of the property currently under active construction or physical present of the property currently under active construction or physical present of the property currently under active construction or physical present of the property currently under active construction or physical present of the property currently under active curre	eparation?		Yes No
If under physical preparation, check which activity the organization. Architectural work Soil testing Engineering work Land clearing activities	Site improvement wor Environmental or land	K	
 Is the incomplete improvement designed and intended to be used Does any portion of this property produce income? 		-	
If yes, attach a statement describing use of the revenue. 4. Is the land on which the incomplete improvement is located reasin the operations of the organization?			Yes No
List all other individuals and organizations that used th	Dates Used	Activity	Rent Paid, If Any
Continue	on additional sheets as needed.		



Schedule B: Description of Personal Property

Complete one Schedule B form for **all** personal property to be exempt. List only property owned by the organization. Continue on additional pages if necessary. Attach completed schedule to the application for exemption.

Name of Property Owner		
s this property reasonably necessary for operation of the organization?		Yes No
ltem	Location	